

Regional Permit Application for Oversize/Overweight Movement

All Sections Must Be Completed

Company Name		Contact Person	Phone <i>(WITH AREA CODE)</i>		Fax <i>(WITH AREA CODE)</i>	
Street Address			City	State	Zip Code	

Description of Non-Reducible Load or Vehicle				Dates Valid (Max. 5 Days)		
Origin		Destination				
Routes of Travel for Each State						
Vehicle License Number		Base State	Truck (# of Axles)	Tractor (# of Axles)	Semi-Trailer (# of Axles)	Trailer (# of Axles)
Unit #	VIN Number		Year	Make	USDOT No.	
Overweight: Draw diagram of axle group weight, axle spacing, tire sizes, and number of tires:						
Width	Height	Length	Trailer Length	Front Overhang	Rear Overhang	
Lift Axle? <input type="checkbox"/> Yes <input type="checkbox"/> No	Tire Size on Lift?	<input type="checkbox"/> Single <input type="checkbox"/> Dual	GVW	Legal Weight	Report No.	

Signature (Person Requesting Permit)	Date	Bankcard #	Expiration Date
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COMMENTS - FOR OFFICE USE ONLY

***Applicant Must Fill in Miles
Per State When Overweight***

State	Miles	Fee
Arizona		
Colorado		
Idaho		
Montana		
New Mexico		
Oklahoma		
Oregon		
Texas		
Utah		
Washington		

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